CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1214	Date: May 3, 2013
	Change Request 8170

SUBJECT: Medicare System Update to Include Line Level National Provider Identifier (NPI) Sanction Editing on Critical Access Hospital (CAH) Method II Outpatient Claims

I. SUMMARY OF CHANGES: Currently, Medicare systems apply NPI sanction editing at the claim level, however, with the implementation of Change Request 7578 effective October 1, 2012 the Fiscal Intermediary Shared System (FISS) can now receive rendering NPIs at the line level on CAH outpatient claims. This instruction implements a system update to include NPI sanction editing at the line level for CAH Method II outpatient claims. Medicare systems will continue to apply the same editing that exists for the claim level NPIs.

EFFECTIVE DATE: October 1, 2013

IMPLEMENTATION DATE: October 7, 2013

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated) R=REVISED, N=NEW, D=DELETED-*Only One Per Row*.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE	
N/A		

III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers: No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets.

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC statement of Work. The contractor is not obliged to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS: One Time Notification

^{*}Unless otherwise specified, the effective date is the date of service.

Attachment - One-Time Notification

SUBJECT: Medicare System Update to Include Line Level National Provider Identifier (NPI) Sanction Editing on Critical Access Hospital (CAH) Method II Outpatient Claims

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I. GENERAL INFORMATION

A. Background: With the October 2012 implementation of Change Request 7578, Transmittal 1046, CMS stored line level NPI information for Critical Access Hospitals (CAHs). At the time of the release, sanction editing was not applied at the line level. This instruction provides direction to the Fiscal intermediary Shared System (FISS) to apply the same editing, conditions and sanctions for the line level NPI fields that are currently being applied at the claim level.

B. Policy: The policy for this provision will remain the same.

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement.

Number	Requirement	Re	Responsibility									
		Α	/B	D	F	C	R		Sha	red-		Other
		M	AC	M	I	A	Н		Sys	tem		
				Е		R	Н	M	aint	aine	rs	
		P	P			R	I	F	M	V	C	
		a	a	M		I		I	C	M	W	
		r	r	A		Е		S	S	S	F	
		t	t	C		R		S				
			_									
		A	В									
8170.1	Medicare contractors shall apply the same editing,	X			X			X				
	conditions, and sanctions for the line level NPI fields											
	that are curently being applied at the claim level.											

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	Responsibility						
			P a r t B	D M E M A C	FI	C R R I E R	R H H I	Other	
8170.2	MLN Article: A provider education article related to								

Number	Requirement	Re	espo	nsibi	ility			
			AC	D M E	F I	C A R	Н	Other
		P a r t	P a r t	M A C		R I E R	Ι	
	this instruction will be available at http://www.cms.hhs.gov/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.							

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
CR 7686	Medicare System Update to Include a Rendering Provider Field to Allow Correct Physician National Provider Identifier (NPI) Reporting for the Primary Care Incentive Program (PCIP) for Critical Access Hospitals (CAHs) Reimbursed Under the Optional Method
CR 8030	Medicare System Update to Include Rendering Line Level National Provider Identifiers (NPIs) for Primary Care Incentive Program (PCIP) Payments to Critical Access Hospitals (CAHs)
CR 7578	Fiscal Intermediary Shared System (FISS) and Common Working File (CWF) System Enhancement for Storing Line Level Rendering Physicians/Practitioners National Provider Identifier (NPI) and Physician Specialty Code Information.

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Cindy Pitts, 410-786-2222 or Cindy. Pitts@cms.hhs.gov, Jason Kerr, 410-786-2123 or Jason. Kerr@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

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